

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET

SERIAL NO. 10670329

FILING DATE 09-26-03

APPLICANT(S)

308105

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1		1			
2		1		1		
3		2				
4		1				
5	1		1			
6		1		1		
7	1		1			
8		1		1		
9		2				
10		2		2		
11		1				
12	1					
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TOTAL IND.	6		5			
TOTAL DEP.	13		10			
TOTAL CLAIMS	19		11			

	IND	DEP	IND	DEP	IND	DEP
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